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CONFIRMATION NO. 6230

<b>SERIAL NUMBER</b> 10/730,355	<b>FILING OR 371(c) DATE</b> 12/08/2003 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2862	<b>ATTORNEY DOCKET NO.</b> F0017/7000
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## APPLICANTS

Jiankang Huang, Roslindale, MA;  
 Robert C. O'Handley, Andover, MA;

**\*\* CONTINUING DATA \*\*\*\*\*** *YES*

This appln claims benefit of 60/431,487 12/09/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *NDNE*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*** **\*\* SMALL ENTITY \*\***  
 03/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 10	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>BC</i> Initials				

## ADDRESS

021127

## TITLE

High sensitivity, passive magnetic field sensor and method of manufacture

<b>FILING FEE RECEIVED</b> 583	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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